		ATTE	U.S. F	Patent and T	rademarl	d for use through 07/31/2006. k Office; U.S. DEPARTMENT OF COMMERCE		
Under the Pa	aperwork Reduction Act of 1995	no oersôñ	A CONTROL Number	10/730		unless it displays a valid OMB control number.		
TRANSMITTAL		Filing Date	Decem	December 8, 2003				
	FORM		First Named Inventor	Goldbe				
			Art Unit	2617				
(to be used for	r all correspondence after initial	filing)	Examiner Name	Naghm	eh Me	hrpour		
Total Number of Pages in This Submission		Attorney Docket Number	I-2-050	I-2-0505.1US				
	ENCLOSURES (Check all that apply)							
Fee Tran	smittal Form		Drawing(s)			After Allowance Communication to TC		
F	ee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
Extension Express of Information Certified Documer Reply to Incomple	intert/Reply Infer Final Infidavits/declaration(s) In of Time Request Abandonment Request In Disclosure Statement Copy of Priority Int(s) Missing Parts/ te Application Iteply to Missing Parts Inder 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD	ddress		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name	VOLPE AND KOENI	G, P.C.						
Signature	Scott Wolning	hu						
Printed name	Scott Wolinsky	6				<u>-</u> -		
Date	August 0, 0000		l R	lea. No.	40.44			

CERTIFICATE OF TRANSMISSION/MAILING

Reg. No.

46,413

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature Typed or printed name Scott Wolinsky

August 8, 2006

August 8, 2006

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PTO/SB/17 (12-04)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known					
Pees pursuant to the Consolidated App	_ 1 /	Application Numb	er 10/	730,671				
FEE TRAN		Filing Date December 8, 2003						
For FY		First Named Inventor Goldberg et al.						
Applicant claims small entity s	totus		Examiner Name Naghmeh Mehrpour					
Applicant claims small entity s	(\$) 580.00	—[<i>-</i>	Art Unit 2617					
TOTAL AMOUNT OF PAYMENT	/	Attorney Docket No. I-2-0505.1US						
METHOD OF PAYMENT (chec	k all that apply)			·				
Check Credit Card	Money Order	None	Other (ple	ose identify	١٠			
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 09-0435 Deposit Account Name: InterDigital Communications Corporation								
For the above-identified dep		r is hereb						
Charge fee(s) indicate	·		· — `		cated below, excep	t for the fil	ina fee	
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under 37 CFR 1.16 a WARNING: Information on this form m	nd 1.17		[ZZ] Giodii a			do credit ca	rd	
information and authorization on PTO-		Jaiu IIIIOII	mation should not	De miciadea	i on this form. Provid	de credit car	u	
FEE CALCULATION								
1. BASIC FILING, SEARCH, A	ND EXAMINATION FE	EES						
FILI	NG FEES 5		H FEES Small Entity		TION FEES Small Entity			
Application Type Fee		Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Pai	d (\$)	
Utility 300	150	500	250	200	100			
Design 200	100	100	50	130	65			
Plant 200	100	300	150	160	80			
Reissue 300	150	500	250	600	300			
Provisional 200	100	0	0	0	0			
2. EXCESS CLAIM FEES						5 (f) S	mall Entity	
Fee Description Fach claim over 20 or for Reiss	mes each claim over ?	n and n	nore than in the	original :	natent	Fee (\$) - 50	Fee (\$) 25	
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100								
Multiple dependent claims	,					360	180	
Total Claims Extra C		Fee Pa	iid (\$)		ependent Claims			
HP = highest number of total claims pa	 " 	0.00	<u></u>	<u>Fee (\$)</u>	Fee Paid	<u>(\$)</u>		
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- = x = 0.00 HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)								
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = / 50 = (round up to a whole number) x = 0.00								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)								
Other: Statutory Disclaimer and Petition for Extension of Time								
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SUBMITTED BY								
Signature Sept 1	Wohnster	(At	egistration No. 46 ttorney/Agent)	5,413	Telephone 2	215-568-6	6400	

SUBMITTED BY	Λ	_	
Signature Scott Wohn	olen.	Registration No. 46,413 (Attorney/Agent)	Telephone 215-568-6400
Name (Print/Type) Scott Wolinsky	0		Date August 8, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.